
**SEMINOLE COUNTY GOVERNMENT
AGENDA MEMORANDUM****SUBJECT:** US Soccer Florida Cup**DEPARTMENT:** Economic Development**DIVISION:** Tourism Development**AUTHORIZED BY:** William McDermott**CONTACT:** Shani Beach**EXT:** 7135**MOTION/RECOMMENDATION:**

Approve and authorize the Chairman to execute an agreement with US Soccer- Florida Cup in the amount of \$9,000 for the 2010 Florida Cup.

County-wide

William McDermott

BACKGROUND:

In 2009, The Florida Cup was held in Bradenton, Florida. This event hosted 66 teams with over 900 participants and generated an economic impact of approximately \$650,000. If approved, this will be the first time that Seminole County has had the opportunity to host The Florida Cup. Event organizers are anticipating that our central location will draw a greater number of participants bringing 600 hotel room nights to Seminole County generating an economic impact of over \$821,000. At the September 10, 2009 meeting of the Tourist Development Council, the TDC unanimously recommended awarding a grant of \$9,000 to be used for facility fees at the Sylvan Lake Training Center and The David Maus Soccer Complex.

STAFF RECOMMENDATION:

Staff Recommends that the Board authorize the Chairman to execute an agreement with US Soccer- Florida Cup in the amount of \$9,000 for the 2010 Florida Cup.

ATTACHMENTS:

1. Agreement

Additionally Reviewed By:

- Budget Review (Lisa Spriggs, Ryan Switzer)
- County Attorney Review (Ann Colby)

2010 FLORIDA CUP TOURIST TAX FUNDING AGREEMENT

THIS AGREEMENT is made and entered this _____ day of _____, 20____, by and between **SEMINOLE COUNTY**, a political subdivision of the State of Florida, whose address is Seminole County Services Building, 1101 East First Street, Sanford, Florida 32771, hereinafter referred to as "COUNTY", and **US CLUB SOCCER-FLORIDA CUP**, whose address is 777 East Atlantic Avenue, #346, Delray Beach, Florida 33483-5352, hereinafter referred to as "USCS".

W I T N E S S E T H:

WHEREAS, the Florida State Legislature enacted Section 125.0104, Florida Statutes, known as the "Local Option Tourist Development Act" in response to the growing need of Florida counties to provide additional revenue sources for tourist development to stimulate the local economy; and

WHEREAS, Section 125.0104, Florida Statutes, provides that Tourist Development Tax Revenues may be used to acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate, or promote publicly owned or operated convention centers, sports stadiums, sports arenas, coliseums, or auditoriums within the boundaries of COUNTY'S special taxing district in which the tax is levied; and

WHEREAS, the voters of Seminole County approved by referendum the imposition of the Tourist Development Tax on transient rental accommodations in Seminole County; and

WHEREAS, COUNTY, in coordination with the Tourist Development Council, wishes to appropriate Tourist Development Tax Revenues as operational funds to host the 2010 Florida Cup to be held at Sylvan Lake Park and the Seminole Soccer Complex, one publicly owned and operated and the other owned by a Florida non-profit corporation, located in Seminole County, on March 13-14, 2010; and

WHEREAS, said tourist tax monies will be used to pay facility fees for the above-listed facilities,

NOW, THEREFORE, in consideration of the mutual understandings and agreements set forth herein, COUNTY and USCS agree as follows:

Section 1. Term. This Agreement shall be effective from the date of its execution by the parties until September 30, 2010, unless earlier terminated as provided herein.

Section 2. Termination. This Agreement may be terminated by either party at any time, with or without cause, upon not less than thirty (30) days written notice to the other party as provided for herein or, at the option of COUNTY, immediately in the event that USCS fails to fulfill any of the terms, understandings, or covenants of this Agreement. COUNTY shall not be obligated to pay for any services provided or costs incurred by USCS after USCS has received notice of termination.

Section 3. Services.



(a) Up to NINE THOUSAND AND NO/100 DOLLARS (\$9,000.00) in tourist tax funds from this Agreement shall be used to pay facility use fees at the Sylvan Lake Park and the Seminole Soccer Complex for the 2010 Florida Cup event as described in Exhibit A, attached hereto and incorporated herein.

(b) USCS shall submit written invoices to COUNTY for payment of facility use for the event for combined usage of the above listed facilities not to exceed a total of NINE THOUSAND AND NO/100 DOLLARS (\$9,000.00).

(c) The COUNTY shall pay the above listed invoices from tourist tax funds no later than thirty (30) days after their submission.

(d) ONE THOUSAND NINE HUNDRED TWELVE AND NO/100 DOLLARS (\$1,912.00) of the not-to-exceed NINE THOUSAND AND NO/100 DOLLARS (\$9,000.00) in tourist tax funds shall be paid to the Seminole Soccer

Club, Inc. d/b/a Florida Soccer Alliance as a deposit for rental of the Seminole Soccer Complex for the Florida Cup event.

(e) All promotional packages sent out by USCS for the event, as described in Exhibit "A", must contain a list of Seminole County hotels provided by the Seminole County Convention and Visitors Bureau. No other hotel list may be included in the promotional packet. All such promotional packets must be approved by COUNTY prior to distribution in order to qualify for reimbursement.

(f) USCS shall permit a third-party company, as designated by the COUNTY to conduct on-site surveys during the 2010 Florida Cup event to coordinate the survey process. USCS shall cooperate in making their event accessible in whatever manner necessary for completion of the survey.

(g) USCS shall be required to have and maintain a website for the purpose of promoting tourism to and attendance at USCS's event. Said website shall be linked to the  Seminole County Tourism website (www.visitseminole.com) and such link shall be maintained throughout the duration of this Agreement.

(h) Failure to comply with or failure to meet the requirements of this Section, including time deadlines, shall result in termination of this Agreement and forfeiture of all financial assistance rendered to USCS by COUNTY pursuant to this Agreement.

Section 4. Liability and Insurance.

(a) **Liability.** COUNTY and its Commissioners, officers, employees, and agents shall not be deemed to assume any liability for the acts, omissions and negligence of USCS and its officers, employees, and agents in the performance of services provided hereunder

(b) **Insurance.**

(1) USCS shall furnish COUNTY with a Certificate of Insurance signed by an authorized representative of the insurer

evidencing the insurance required by this Section (Commercial General Liability). COUNTY, its officials, officers and employees shall be named additional insured under the Commercial General Liability policy. The Certificate of Insurance shall provide that COUNTY shall be given not less than thirty (30) days written notice prior to the cancellation or restriction of coverage. Until such time as the insurance is no longer required to be maintained by USCS, USCS shall provide COUNTY with a renewal or replacement Certificate of Insurance not less than thirty (30) days before expiration or replacement of the insurance for which a previous certificate has been provided.

(2) The Certificate of Insurance shall contain a statement that it is being provided in accordance with this Agreement and that the insurance is in full compliance with the requirements of this Agreement. In lieu of the statement on the Certificate, USCS shall, at the option of COUNTY, submit a sworn, notarized statement from an authorized representative of the insurer that the Certificate is being provided in accordance with this Agreement and that the insurance is in full compliance with the requirements of this Agreement.

(3) In addition to providing the Certificate of Insurance, if required by COUNTY, USCS shall, within thirty (30) days after receipt of the request, provide COUNTY with a certified copy of each of the policies of insurance providing the coverage required by this Section.

(4) Neither approval by COUNTY nor failure to disapprove the insurance furnished by USCS shall relieve USCS of its full responsibility for performance of any obligation including its indemnification of COUNTY under this Agreement.

(5) Insurance Company Requirements. Insurance companies providing the insurance under this Agreement must meet the following requirements:

(A) Companies issuing policies must be authorized to conduct business in the State of Florida and prove same by maintaining Certificates of Authority issued to the companies by the Department of Insurance of the State of Florida.

(B) In addition, such companies other than those authorized by Section 624.4621, Florida Statutes, shall have and maintain a Best's Rating of "A-" or better and a Financial Size Category of "VII" or better according to A.M. Best Company.

(C) If during the period which an insurance company is providing the insurance coverage required by this Agreement an insurance company shall: 1) lose its Certificate of Authority, or 2) fail to maintain the requisite Best's Rating and Financial Size Category, USCS shall, as soon as it has knowledge of any such circumstance, immediately notify COUNTY and immediately replace the insurance coverage provided by the insurance company with a different insurance company meeting the requirements of this Agreement.  Until such time as USCS has replaced the unacceptable insurer with an insurer acceptable to COUNTY, USCS shall be deemed to be in default of this Agreement.

(6) Specifications. Without limiting any of the other obligations or liability of USCS, USCS shall, at its sole expense, procure, maintain, and keep in force amounts and types of insurance conforming to the minimum requirements set forth in this Section. Except as otherwise specified in this Agreement, the insurance shall become effective prior to the commencement of the event and shall be maintained in force until this Agreement completion date. The amounts and types of insurance shall conform to the following minimum requirements.

(A) Commercial General Liability.

(i) USCS's insurance shall cover USCS for those sources of liability which would be covered by the latest edition of the

standard Commercial General Liability Coverage Form (ISO Form CG 00 01), as filed for use in the State of Florida by the Insurance Services Office, without the attachment of restrictive endorsements other than the elimination of Coverage C, Medical Payment, and the elimination of coverage for Fire Damage Legal Liability.

(ii) The minimum limits to be maintained by USCS (inclusive of any amounts provided by an Umbrella or Excess policy) shall be as follows:

LIMITS

General Aggregate	Two (2) Times the Each Occurrence Limit
Personal & Advertising Injury Limit	\$1,000,000.00
Each Occurrence Limit	\$1,000,000.00

(7) Coverage. The insurance provided by USCS pursuant to this Agreement shall apply on a primary basis and any other insurance or self-insurance maintained by COUNTY or COUNTY's officials, officers or employees shall be excess of and not contributing with the insurance provided by or on behalf of USCS.



(8) Occurrence Basis. The Commercial General Liability required by this Agreement shall be provided on an occurrence rather than a claims-made basis.

Section 5. Billing and Payment. COUNTY hereby agrees to provide funds up to a maximum sum of NINE THOUSAND AND NO/100 DOLLARS (\$9,000.00) for facility use for the Florida Cup event described in Exhibit A to this Agreement. Said funds are payable upon:

(a) Receipt by COUNTY of a Request for Funds Form, attached hereto and incorporated herein as Exhibit B, a facility use invoice from USCS requesting all or part of the above be paid by COUNTY, and a list of the teams that participated in the described Florida Cup event. Such request by USCS shall only be for the facility use fees specifically provided for herein. Such Request for Funds Form shall be properly completed and submitted no later than thirty (30) days after the event.

Failure to comply with this requirement shall result in termination of this Agreement and forfeiture of all financial assistance granted to USCS pursuant to this Agreement.

(b) Verification by the Seminole County Economic Development/Tourism Director that USCS has held the event for which facility use fees are sought and has complied with the reporting requirements contained hereinafter;

(c) The original payment requests shall be sent to:

Original: Director
Seminole County Economic Development/Tourism
1000 AAA Drive, Suite 200 MS14
Heathrow, Florida 32746

A duplicate payment request shall be sent to:

Duplicate: Director, Department of Finance
Seminole County Services Building
1101 East First Street
Sanford, Florida 32771

(d) The Request for Funds Form shall be accompanied by a detailed report of the economic impact on COUNTY resulting from the event funds for which funds have been provided hereunder. Such report, attached hereto and incorporated herein as Exhibit C, shall include, but not be limited to, the actual number of hotel or motel rooms occupied, restaurant meals consumed, and estimated goods and services expenditures.

(e) USCS is responsible for documenting the number of room nights actually utilized per event at each Seminole County hotel. USCS must have each hotel individually certify the actual number of rooms picked up by having the General Manager complete the Hotel Room Pickup Form, attached hereto and incorporated herein as Exhibit D. No payments will be processed until all required documentation has been submitted. COUNTY reserves the right to reduce the maximum amount of any grant awarded in the event guaranteed room nights as stated in Exhibit A are not satisfied.

(f) Payment of fees shall be contingent upon USCS's compliance with requirements as stated in Exhibit A.

Section 6. Reporting Requirements. In the performance of this Agreement, USCS shall maintain books, records, and accounts of all activities in compliance with normal accounting procedures. Each Request for Funds Form shall detail costs incurred. As referenced in Exhibit A, USCS shall transmit and certify interim records with each Request for Funds Form submitted to COUNTY.

Section 7. Non-Reimbursable Expenditures.

(a) Non-reimbursable expenditures include, but are not limited to, legal, engineering, accounting, auditing, planning, feasibility studies or consulting services, real property or capital improvements, interest reduction in deficits and liens, prize money, scholarships, awards, plaques or certificates, private entertainment, lodging, food and beverages, and wages, salaries, administrative or travel expenses other than those appearing, if any, in Exhibit A.

(b) The purpose for which Tourist Development Tax grant funds are provided to USCS shall not duplicate programs for which monies have been received, committed, or applied for from another source. The monies provided hereunder shall be expended only for the activities or purposes set forth in Exhibit A.

Section 8. Unavailability of Funds. USCS acknowledges that Tourist Development Tax revenues are the source of funding for this Agreement and that no other COUNTY revenues shall or may be utilized to meet COUNTY's obligations hereunder. If, for whatever reason, the funds pledged by COUNTY to this program should become unavailable, this Agreement may be terminated immediately, at the option of COUNTY, by written notice of termination to USCS as provided hereinafter. COUNTY shall not be obligated to pay for any services provided or costs incurred by USCS after USCS has received such notice of termination. In

the event there are any unused COUNTY funds, USCS shall promptly refund those funds to COUNTY or otherwise use such funds as COUNTY directs.

Section 9. Access to Records. USCS shall allow COUNTY, its duly authorized agent, and the public access to such of its records as are pertinent to all services provided hereunder at reasonable times and under reasonable conditions for inspection and examination in accordance with Florida Statutes.

Section 10. Liaison. USCS shall submit the original copies of the Request for Funds Forms, and any other required reports or correspondence to the following:

Director
Seminole County Economic Development/Tourism
1000 AAA Drive, Suite 200 MS14
Heathrow, Florida 32746

Section 11. Notices. Whenever either party desires to give notice unto the other, it shall be given in writing by certified United States mail, with return receipt requested, and sent to:



For COUNTY:

Director
Seminole County Economic Development/Tourism
1000 AAA Drive, Suite 200 MS14
Heathrow, Florida 32746

For USCS:

Bill Fisher
US Soccer Club
777 East Atlantic Avenue, #346
Delray Beach, Florida 33483-5352

Either of the parties may change, by written notice as provided above, the person or address for receipt of notice.

Section 12. Assignments. Neither party to this Agreement shall assign this Agreement nor any interest arising herein without the written consent of the other.

Section 13. Entire Agreement.

(a) It is understood and agreed that the entire agreement of the parties is contained herein and that this Agreement supersedes all oral

agreements and negotiations between the parties relating to the subject matter hereof as well as any previous agreements presently in effect between the parties relating to the subject matter hereof.

(b) Any alterations, amendments, deletions, or waivers of the provisions of this Agreement shall be valid only when expressed in writing and duly signed by the parties.

Section 14. Compliance with Laws and Regulations. In providing all services pursuant to this Agreement, USCS shall abide by all statutes, ordinances, rules, and regulations pertaining to or regulating the provisions of such services including those now in effect and hereafter adopted. Any violation of said statutes, ordinances, rules, or regulations shall constitute a material breach of this Agreement and shall entitle COUNTY to terminate this Agreement immediately upon delivery of written notice of termination to USCS as provided hereinabove.

Section 15. Conflict of Interest.

(a) USCS agrees that it will not engage in any action that would create a conflict of interest in the performance of its obligations pursuant to this Agreement with COUNTY or which would violate or cause others to violate the provisions of Part III, Chapter 112, Florida Statutes, relating to ethics in government.

(b) USCS hereby certifies that no officer, agent, or employee of COUNTY has any material interest (as defined in Section 112.312(15), Florida Statutes, as over 5 percent), either directly or indirectly, in the business of USCS to be conducted here and that no such person shall have any such interest at any time during the term of this Agreement.

(c) Pursuant to Section 216.347, Florida Statutes, USCS hereby agrees that monies received from COUNTY pursuant to this Agreement will not be used for the purpose of lobbying the legislature or any other State or Federal agency.

IN WITNESS WHEREOF, the parties to this Agreement have caused their names to be affixed hereto by the proper officers thereof for the purposes herein expressed on the day and year first above written.

US CLUB SOCCER

Witness

By: _____

Print Name

BOB KUZBYT,
Tournament Director

Witness

Date: _____

Print Name

ATTEST:

BOARD OF COUNTY COMMISSIONERS
SEMINOLE COUNTY, FLORIDA

MARYANNE MORSE
Clerk to the Board of
County Commissioners of
Seminole County, Florida.

By: _____
BOB DALLARI, Chairman

Date: _____

For the use and reliance
of Seminole County only.

As authorized for execution
by the Board of County Commissioners
at their _____, 20____
regular meeting.

Approved as to form and
legal sufficiency.

County Attorney

AEC/lpk
12/21/09
P:\Users\Legal Secretary CSB\Economic Development\2010 Florida Cup.doc

Attachments:

- Exhibit A - Project Description and Expenses
- Exhibit B - Request For Funds Form
- Exhibit C - Economic Impact Report
- Exhibit D - Hotel Room Pickup Form

Exhibit A

APPLICATION FOR FUNDS
GENERAL INSTRUCTION

THE FOLLOWING QUESTIONS MUST BE ANSWERED IN FULL.

I. GENERAL INFORMATION

To assist us in evaluating the impact of your event on Seminole County and to better understand what support you are requesting, the following questions must be answered completely. Please do not skip any information which applies to your event.

Please contact Danny Trosset, Sales and Marketing Manager at 407-665-2913 with any questions.

Copies of the following items are required and should be attached to your application:

- (X) IRS Determination Letter of non-profit status
- (X) List of current Officers and Board members indicating terms. (If available)
- (X) Proof of Liability Insurance

PART II APPLICATION FOR FUNDS
TOURIST DEVELOPMENT SPONSORSHIP
FY 2008-09

I. GENERAL INFORMATION

(1) NAME OF ORGANIZATION: US Clubs Soccer's - Florida Cup

(2) NAME OF EVENT: Florida Cup

(3) CONTACT PERSON: Bill Fisher

(4) CONTACT PERSON E-MAIL: floridacup@gmail.com

(5) COMPLETE ADDRESS OF ORGANIZATION:

Florida Cup	Phone:	561-706-1081
777 East Atlantic Avenue, #346	Fax:	561-266-8901
Delray Beach, FL		

(6) ORGANIZATION'S CHIEF OFFICIAL:

Bob Kuzbyt		
Tournament Director		
Florida Cup	Phone:	561-706-1081
777 East Atlantic Avenue, #346	Fax:	561-266-8901
Delray Beach, FL		

(7) INTENDED USE OF FUNDS: Facility Fees – March 13-14, 2010 – Florida Cup

(8) AMOUNT REQUESTED: \$9,000.00

(9) IF ENTIRE REQUEST CANNOT BE FUNDED, CAN THE EVENT BE RESTRUCTURED FOR LESS FUNDING? YES X NO

II DETAILS ON YOUR ORGANIZATION:

In narrative form please describe your organization in the following areas. **If needed, use a separate sheet to complete these questions in detail.**

- (1) What are your organization's goals and objectives?

The goal and objective of the US Club Soccer's Florida Cup is to coordinate and deliver a well organized, professionally coordinated State Cup (tournament) for youth soccer teams (U12-U19) in Florida.

- (2) What services does your organization provide?

The Florida Cup provides a service to youth teams and clubs throughout Florida in the coordination of a State Cup tournament under US Club Soccer. In particular as a tournament we provide services in coordination of all aspects of competition from team recruitment to referee logistics to facility coordination. All services are provided in a professional manner.

- (3) How will your organization monitor expenditure of funds?

The monitoring of funds is handled through proper accounting and budget procedures. All expenditures are part of an overall budget.

- (4) How will your event bring additional visitors and hotel room nights to Seminole County?

Being a State Cup, which holds more credibility than a typical youth soccer tournament, will draw teams from across Florida from the panhandle to Jacksonville to South Florida to the Gulf Coast. The two biggest soccer markets in Florida are South Florida and Tampa, which all teams from these markets would require hotel accommodations.

- (5) What is your organization's experience in managing sponsorships and grants?

We have Nike as one of our sponsors and feel comfortable dealing with tourist associations and sports commissions as well. We are confident in being able to coordinate a professional marketing campaigning which will benefit the Seminole County tourism industry.

III EVENT INFORMATION (Use additional sheets where necessary.)

- (1) EVENT NAME: US Club Soccer's Florida Cup
(2) TYPE OF EVENT: Soccer Tournament – State Cup
(3) DATE OF EVENT: March 13-14, 2010
(4) LOCATION OF EVENT: Sylvan Lake Training Center (Home) and David Maus Soccer Complex (Overflow)
(5) NUMBER OF DAYS: Two – Saturday and Sunday
HOURS: FROM: 7:00 am TO: 9:00 pm

(6) EVENT PROMOTER (IF OTHER THAN YOUR ORGANIZATION)

Florida Cup and US Club Soccer will be the event promoter

PROJECTED NUMBER OF EXPECTED ADULT PARTICIPANTS

OUT OF STATE: (C6) 0
IN-STATE NON-LOCAL: (C7) 120 - coaches
IN-STATE NON-COUNTY: (C8) 50 - coaches

PROJECTED NUMBER OF EXPECTED YOUTH PARTICIPANTS

OUT OF STATE: (C10) 0
IN-STATE NON LOCAL: (C11) 1020
IN STATE NON-COUNTY: (C12) 425

PROJECTED NUMBER OF ADULT SPECTATORS:

OUT OF STATE: (C14) 0
IN-STATE NON LOCAL: (C15) 1,530
IN STATE NON-COUNTY: (C16) 637.5

PROJECTED NUMBER OF YOUTH SPECTATORS

OUT OF STATE: (C18) 0
IN-STATE NON LOCAL: (C19) 255
IN-STATE NON COUNTY: (C20) 106.25

PROJECTED NUMBER OF MEDIA, STAFF, OFFICIALS

OUT OF STATE: (C22) 0
IN-STATE NON LOCAL: (C23) 8
IN STATE NON-COUNTY: (C24) 0

EXPECTED NUMBER OF ROOM NIGHTS: (C29) 600 room nights
EXPECTED AVERAGE ROOM RATE: (D29) \$90

EXPECTED FACILITY FEES: (B25) \$9,000

EXPECTED ADDITIONAL EVENT EXPENSES: (B26) \$39,950

*In-state Non-Local: Participant or Spectator that resides outside of a 100 mile radius. * In-State Non-County: Participant or Spectator that resides within a 100 mile radius but not within Seminole County.

(11) THE ESTIMATED DIRECT ECONOMIC IMPACT ON SEMINOLE COUNTY FROM YOUR EVENT (The Eco Impact form for the application can be found on the website): \$821,200

(12) WHAT IS THE **GUARANTEED MINIMUM** NUMBER OF ROOM NIGHTS YOUR EVENT WILL BRING TO SEMINOLE COUNTY? (This is the minimum number of rooms that must be captured by the event and documented by submitting the Room Night Pick-Up Form (Exhibit D) within 90 days of the conclusion of the event. The Seminole County CVB reserves the right to reduce the grant disbursement should the event fail to meet this minimum room night guarantee.) 550

(13) PROVIDE A LIST OF OTHER EVENT SPONSORS AND THE AMOUNT(S) OF THEIR SPONSORSHIPS. Nike. The Nike sponsorship does not entail a monetary sponsorship but an in-kind goods sponsorship that includes balls, equipment, and gear. Estimated value: \$1,000 - \$1,500.

(14) PROVIDE THREE (3) YEARS OF THIS EVENT'S HISTORY, IF APPLICABLE.

Previous Event: 2009 Florida Cup (U15-U19)

Date March 6-7, 2009. Location Bradenton, FL

Contact Name/Phone: Bill Fisher/561-266-9596

Total Participants 66 teams; 990+/- players; 132+/- coaches; 1980+/- adults. Room Nights 450+/-

Economic Impact \$650,000

Previous Event: 2008 Florida Cup (U11-U14)

Date September 19-20, 2008. Location Delray Beach, FL

Contact Name/Phone: Bill Fisher/561-266-9596

Total Participants 45 teams; 585+/- players; 90+/- coaches; 1,170+/- adults. Room Nights 120+/-

Economic Impact \$450,000

EVENT BUDGET SUMMARY

INCOME SOURCES:

TOURIST DEVELOPMENT TAX REQUEST \$9,000.00

ADDITIONAL INCOME SOURCES (Seminole County cannot be sole source.)

Tournament Registration Fees: \$38,700.00

TOTAL ADDITIONAL INCOME

Hotel Commissions: \$2,000

Merchandise Sales: \$1,000

TOTAL INCOME ALL SOURCES \$50,700.00

EVENT EXPENSES:

Provide an itemized summary indicating the intended use of TDC funds. Please be as explicit as possible, including intended publications, promotional materials, etc. and how much money will be expended (tentatively) for each category. Use additional sheets if necessary.

TOTAL EXPENSES

Referee fees: \$29,200.00

Tournament Software: \$1,380.00

Medals/Trophies: \$1,620.00

Athletic Trainers: \$1,250.00

Staff Travel: \$1,400.00

Marketing/Advertising: \$3,000.00

Facility Fees: \$9,000.00

Ice: \$600.00

Hospitality: \$1000.00

Portable Toilets: \$500.00

Total Expenses: \$48,950.00

Intended Utilization of Tourist Tax Funds:

To offset facility fees.

TOTAL EVENT EXPENSES \$48,950.00

CERTIFICATION

I have reviewed this Application for Funds from the Tourist Development Council for FY 2008-09. I am in full agreement with the information contained herein. To the best of my knowledge, the information contained in this Application and its attachments is accurate and complete.



Chief Corporate Officer

Aug 14, 2009
Date



Witness PAUL E ADAMS

8-14-2009
Date

EXHIBIT "B"
REQUEST FOR FUNDS

SEMINOLE COUNTY TOURISM DEVELOPMENT
1230 DOUGLAS AVENUE, #116, LONGWOOD FL 32779

EVENT NAME _____

ORGANIZATION _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

NAME OF CONTACT _____ CONTACT TELEPHONE _____

CONTACT E-MAIL _____

EVENT DATE FROM _____ TO _____

REQUEST # _____

() INTERIM REPORT () FINAL REPORT

TOTAL CONTRACT AMOUNT \$ _____

<u>EXPENSE</u>	<u>BUDGET</u>	<u>REIMBURSEMENT REQUESTED</u>
_____	_____	_____
_____	_____	_____
TOTALS	_____	_____

(For Final Report only)
Please complete the following:

#of Hotels used _____

#of Hotel room nights _____

#of out-of-town participants _____

#of out-of-town fans _____

#of out-of-town media _____

Total direct economic impact \$ _____

NOTE: Furnishing false information may constitute a violation of applicable State and Federal laws.

CERTIFICATION OF FINANCIAL OFFICER: I certify that the above information is correct based on our official accounting system and records, consistently applied and maintained and that the cost shown have been made for the purpose of and in accordance with, the terms of the contract. The funds requested are for reimbursement of actual cost made during this time period.

SIGNATURE _____ TITLE _____

SEMINOLE COUNTY ECONOMIC IMPACT STUDY

Group Name: Florida Cup
 Event Organizer: Florida Cup
 Contact Information

Dates of Event
 Location of Event
 Contact Information

Exhibit C

Expected Figures					Totals
Expected Adult Participants	Multiplier	Quantity	Event Days		
Out of State	\$143.00	0	2		\$0.00
In-State Non-Local	\$125.00	120	2		\$30,000.00
In-State Non-County	\$16.00	50	2		\$1,600.00
Expected Youth Participants					
Out of State	\$72.00	0	2		\$0.00
In-State Non-Local	\$125.00	1020	2		\$255,000.00
In-State Non-County	\$16.00	425	2		\$13,600.00
Expected Adult Spectators					
				Ratio	
Out of State	\$143.00	0	2	1.5	\$0.00
In-State Non-Local	\$125.00	1020	2	1.5	\$382,500.00
In-State Non-County	\$16.00	425	2	1.5	\$20,400.00
Expected Youth Spectators					
				Ratio	
Out of State	\$72.00	0	2	0.25	\$0.00
In-State Non-Local	\$125.00	1020	2	0.25	\$63,750.00
In-State Non-County	\$16.00	425	2	0.25	\$3,400.00
Expected Media/Professionals					
Out of State	\$143.00	0	2		\$0.00
In-State Non-Local	\$125.00	8	2		\$2,000.00
In-State Non-County	\$16.00	0	2		\$0.00
Expected Facility Fees	\$8,000.00				
Expected Additional Event Expenses	\$39,950.00				
Expected Total Direct Impact					\$821,200.00

Expected Hotel Impact	Resort Tax	Room Nights	Average Room Rate	Total
	0.05	600	90	\$2,700

Expected Economic Impact				
		Multiplier	Divider	Total
Total Output Economic Impact	\$821,200	1.5		\$1,231,800.00
Total Earnings Impact	\$821,200	0.57		\$488,084.00
Total Employment Impact	\$821,200	22	1000000	\$18.07

Expected Tax Generated				
	Total Direct Impact	Tax Free Sales	Tax Rate	Total
State Sales Tax Generated	\$821,200	\$0.00	0.06	\$49,272.00
	FL DOR Multiplier	Total		
State Sales Tax Reimbursed to County	0.09653	\$4,756.23		
	Total Direct Impact	Tax Free Sales	Tax Rate	Total
County Local Option Sales Tax	\$821,200.00	\$0.00	0.01	\$8,212.00

ROOM NIGHT PICKUP CERTIFICATION FORM

Exhibit D

Request for Room Night Pick-UP

Attn: General Manager, please provide the room night information for the event dates listed below **as soon as possible**:

Hotel/ Location: _____

Contact Person: _____ **Phone:** _____

GM Signature: _____

-I certify the organization/event listed below consumed the following room nights.

Group Name: _____

Event Name: _____

Event Dates: _____

Total Number of Room Nights Picked up from

Event: _____

- The purpose of this form is to **certify the number of local hotel room nights in Seminole County attributable to this event**. The Seminole County CVB reserves the right to unilaterally reduce the maximum amount of any grant awarded should the applicant's room night guarantee not be satisfied or documented with this Room Night Pick Up Certification Form. Your cooperation in completing this form is greatly appreciated. For additional information please contact Sharon Sears, CVB Executive Director at (407) 665-2901.